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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|---|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Carlos | | Rosa |
| | | First name | | First name |
| | license or passport). | Middle name | _ | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Murillo, Sr. | _ | Murillo |
| | | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| | | | | |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0918 | | xxx-xx-4229 |

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Debtor 1 Carlos Murillo, Sr.
Debtor 2 Rosa Murillo

Case number (if known)

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|---|---|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs |
| Where you live | 12208 S Lawndale | If Debtor 2 lives at a different address: |
| | Alsip, IL 60803 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | Cook | |
| | County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names EINs ### Tage 1 |

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| Der | Rosa Wuriilo | | | | Case Hullibel (# known) | | | |
|-----------|--|---|--|--|--|---------------------------------------|--|--|
| | | | | | | | | |
| Par 7. | Tell the Court About Y | | | each see Notice Required by | 11 U.S.C. § 342(b) for Individuals Filing fo | r Bankruptcv | | |
| | Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | choosing to file under | Chapter 7 | | | | | | |
| | | ☐ Chapter 11 | | | | | | |
| | | ☐ Chapter 12 | | | | | | |
| | | ☐ Chapter 13 | | | | | | |
| 8. | How you will pay the fee | ■ I will pay th | oo ontire fee when I | file my netition. Please chee | k with the clerk's office in your local court | for more details | | |
| 0. | now you will pay the lee | about how y order. If you | ou may pay. Typical Ir attorney is submitti | ly, if you are paying the fee yo | burself, you may pay with cash, cashier's calf, your attorney may pay with a credit cal | heck, or money | | |
| | | a pre-printe | | nents. If you choose this optic | on, sign and attach the Application for Indi | viduals to Pav | | |
| | | | ee in Installments (C | | ni, sign and attach the Appheauch for mar | nddais to 1 dy | | |
| | | but is not re applies to ye | equired to, waive your our family size and you | r fee, and may do so only if yo ou are unable to pay the fee ir | n only if you are filing for Chapter 7. By lav ur income is less than 150% of the official n installments). If you choose this option, y | poverty line that ou must fill out | | |
| | | the <i>Applicat</i> | tion to Have the Chap | oter 7 Filing Fee Waived (Offic | cial Form 103B) and file it with your petition | 1. | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | |
| | | District | t | When | Case number | | | |
| | | District | t | When | Case number | | | |
| | | District | t | When | Case number | | | |
| 10. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | Debtor | • | | Relationship to you | | | |
| | | District | t | When | Case number, if known | | | |
| | | Debtor | | | Relationship to you | | | |
| | | District | t | When | Case number, if known | | | |
| 11. | Do you rent your | □ No. Go to | line 12. | | | | | |
| | residence? | ■ Yes. Has y | our landlord obtaine | d an eviction judgment agains | t you and do you want to stay in your resid | dence? | | |
| | | . oo. ■ | No. Go to line 12. | | | | | |
| | | _ | | | Judgment Against You (Form 101A) and fi | le it with this | | |
| | | | bankruptcy petition | | | | | |

Debtor 1

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| Deb | otor 2 Rosa Murillo | | | | Case number (if known) |
|---|---|-----------|----------------|---|---|
| | | | | | |
| Par | Report About Any Bu | sinesses | You Owr | ı as a Sole Proprie | tor |
| 12. Are you a sole proprietor of any full- or part-time business? | | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | e and location of bus | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | per, Street, City, Stat | te & ZIP Code |
| | it to this petition. | | Chec | k the appropriate bo | x to describe your business: |
| | | | | Health Care Busir | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) |
| | | | | • | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | 9 |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you ir | ndicate that you are low statement, and f | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Anv | · Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| | Do you own or have any property that poses or is alleged to pose a threat of imminent and | ■ No. | | the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | |
| | • | | | | Number, Street, City, State & Zip Code |
| | | | | | |

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Debtor 1 Carlos Murillo, Sr.

Debtor 2 Rosa Murillo Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Document Page 6 of 68

| | tor 2 Rosa Murillo | • | | | Case number | er (if known) | | | |
|------|--|--|--|----------------------------------|------------------------------------|---|--|--|--|
| Pari | 6: Answer These Quest | ions for Re _l | porting Purposes | | | | | | |
| 16. | What kind of debts do you have? | | Are your debts primarily consuindividual primarily for a personal, | | | ned in 11 U.S.C. § 101(8) as "incurred by an | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | ■ No. Go to line 16c. | | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | | |
| | | 16c | State the type of debts you owe th | at are not consu | mer debts or busines | ss debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go | o to line 18. | | | | | |
| | Do you estimate that after any exempt property is excluded and | | I am filing under Chapter 7. Do yo are paid that funds will be availabl | | | perty is excluded and administrative expenses ? | | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | | |
| | be available for distribution to unsecured creditors? | | □ Yes | | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | 2 5,001-50,000 | | | |
| | you estimate that you owe? | □ 50-99 | | 5001-10,000 | | 50,001-100,000 | | | |
| | | ☐ 100-199 ☐ 200-999 | | □ 10,001-25,0 | 00 | ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$50 | | \$1,000,001 | | □ \$500,000,001 - \$1 billion | | | |
| | be worth? | | 1 - \$100,000 | □ \$10,000,001 □ \$50,000,001 | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | | 01 - \$500,000 01 - \$1 million | | 01 - \$500 million | ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities | \$0 - \$50 | | □ \$1,000,001 | | □ \$500,000,001 - \$1 billion | | | |
| | to be? | | 11 - \$100,000 01 - \$500,000 | □ \$10,000,001 □ \$50,000,001 | | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion | | | |
| | | _ | 01 - \$1 million | | 01 - \$500 million | ☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | | |
| For | you | I have exa | mined this petition, and I declare | under penalty of p | perjury that the inforr | mation provided is true and correct. | | | |
| | | | | | | under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | | |
| | | | | | | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | /s/ Carlos | s Murillo, Sr. | | /s/ Rosa Murillo | | | | |
| | | | l urillo, Sr. of Debtor 1 | | Rosa Murillo Signature of Debto | r 2 | | | |
| | | Executed | | | | rch 28, 2017 | | | |
| | | | MM / DD / YYYY | | MIV | I / DD / YYYY | | | |

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| Dahtand | Carles Murille Cr | Document | Page 7 of 68 | | |
|----------------------|--|---|--------------------------|--------------------------------|--------------------|
| Debtor 1 Debtor 2 | Carlos Murillo, Sr. Rosa Murillo | | Cas | e number (if known) | |
| | | | | | |
| • | attorney, if you are ted by one | I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify | ed States Code, and have | explained the relief available | under each chapter |
| • | not represented by ey, you do not need s page. | and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect. | | ` ' | , , |
| | | /s/ Julie Gleason | Date | March 28, 2017 | |
| | | Signature of Attorney for Debtor | | MM / DD / YYYY | |
| | | Julie Gleason | | | |
| | | Printed name | | | |
| | | Gleason & Gleason Firm name | | | |
| | | 77 W Washington, Ste 1218 | | | |
| | | Chicago, IL 60602 | | | |
| | | Number, Street, City, State & ZIP Code | · | · | |

Email address

troy@chicagobk.com

Contact phone (312) 578-9530

6273536Bar number & State

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| | | | IL FAU C O OLOO | |
|--------------------|--------------------------|---------------------|----------------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Carlos Murillo, Sr | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Rosa Murillo | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States Ba | inkruptcy Court for the: | NORTHERN DISTRICT C | OF ILLINOIS | |
| Case number _ | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your as | ssets of what you own |
|-----|--|-------------|-------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 149,566.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 55,447.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 205,013.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 194,419.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 5,000.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 57,643.00 |
| | Your total liabilities | \$ | 257,062.00 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 1. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,787.24 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,784.00 |
| Pa⊦ | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sch | nedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| Debtor 1 | Carlos Murillo, Sr. | Bocament | 1 age 3 01 00 |
|----------|---------------------|----------|------------------------|
| Debtor 2 | Rosa Murillo | | Case number (if known) |

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,062.57

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cl | aim |
|--|----------|----------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 5,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 5,000.00 |

🚣 Back to sameh

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Off Market

12208 S Lawndale Ave Alsip, IL 60803

O Calculate Commute Time

3 beds · 2 full baths · 962 sq ft

Est. \$149,566 🚯

< Prev Next >

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| | Ca | ase 17-09932 Doc 1 | | 03/29/17 ument | Entered 03/29/1 Page 11 of 68 | 7 16:04 | :23 De | sc | Main |
|----------------------------|---|---|--------------------------|---|---|--------------|---|--------|--|
| Fill | in this infor | mation to identify your case and th | nis filing | : | | | | | |
| Deb | otor 1 | Carlos Murillo, Sr. | | | | | | | |
| Dah | otor 2 | First Name Middle Rosa Murillo | e Name | | Last Name | | | | |
| | use, if filing) | | e Name | | Last Name | | | | |
| Unit | ted States Ba | ankruptcy Court for the: NORTHER | N DISTE | RICT OF ILLIN | IOIS | | | | |
| Cas | se number _ | | | | | | | | Check if this is an amended filing |
| SC n ea hink nfor | chedul ch category, s it fits best. E mation. If moi ver every ques | | le. If two heet to th | married people iis form. On the | are filing together, both are top of any additional pages | equally resp | onsible for su | pply | ing correct |
| Part | Describe | Each Residence, Building, Land, or Ot | her Real | Estate You Ow | n or Have an Interest In | | | | |
| | No. Go to Pa | rt 2. is the property? | | | | | | | |
| 1.1 | 40000 C I | avendala | What | is the property | ? Check all that apply | | | | |
| | Street address | awndate, if available, or other description | | Single-family h Duplex or multi Condominium | -unit building | the amoun | t of any secure | d clai | or exemptions. Put ms on Schedule D: ecured by Property. |
| | Alsip | IL 60803-0000 State ZIP Code | | Manufactured of Land Investment pro | | Current va | | | rrent value of the rtion you own? \$149,566.00 |
| | | | □ □ Who I | Timeshare Other has an interest Debtor 1 only | in the property? Check one | (such as f | ee simple, ten e), if known. | | ownership interest by the entireties, or |
| | Cook | | | Debtor 2 only | | | | | |
| | County | | | | the debtors and another u wish to add about this item | (see in | c if this is com structions) ocal | mun | ity property |
| | | | - · | | | | | | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$149,566.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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| Debte Debte | | arlos Murillo osa Murillo | o, Sr. | | Case number (if kno | own) | |
|----------------|----------------|---------------------------------------|----------------------|--|------------------------------|---------------|---|
| | | trucks, tracto | rs, sport utility ve | hicles, motorcycles | | | |
| | | | | | | | |
| | Yes | | | | | | |
| 3.1 | Make: | Kia | | Who has an interest in the property? Check one | | | aims or exemptions. Put |
| 0.1 | Model: Sol | | | Debtor 1 only | | | ed claims on Schedule D: ims Secured by Property. |
| | Year: | 2016 | | Debtor 2 only | | | |
| | | nate mileage: | 5000 | Debtor 1 and Debtor 2 only | Current valu entire prope | | Current value of the portion you own? |
| | | ormation: | | ☐ At least one of the debtors and another | | • | . , |
| | Motor | Vehicle: | | ☐ Check if this is community property (see instructions) | <u>*17</u> | ,000.00 | \$17,000.00 |
| | Mala | Chevrolet | | Who has an interest in the present Q () | Do not deduc | et secured cl | aims or exemptions. Put |
| 3.2 | Make: | Equinox | | Who has an interest in the property? Check one | the amount o | f any secure | ed claims on Schedule D: |
| | Model: | 2013 | | ■ Debtor 1 only | Creditors wn | o Have Ciai | ims Secured by Property. |
| | Year: | nate mileage: | 35000 | Debtor 2 only | Current valu entire prope | | Current value of the portion you own? |
| | | formation: | 33000 | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entire prope | ity: | portion you own: |
| | | rives and Pa | ys | ☐ Check if this is community property | \$18 | ,000.00 | \$18,000.00 |
| | | | | (see instructions) | | <u></u> | |
| 3.3 | Make: | 2014 | | Who has an interest in the property? Check one | | | aims or exemptions. Put |
| 0.0 | Model: | Chevy | | Debtor 1 only | | | ed claims on Schedule D: ims Secured by Property. |
| | Year: | Cruz | | Debtor 2 only | | | |
| | | nate mileage: | | ■ Debtor 1 and Debtor 2 only | Current valu entire prope | | Current value of the portion you own? |
| | | formation: | | ☐ At least one of the debtors and another | entire prope | ity: | portion you own: |
| | | | | Check if this is community property (see instructions) | \$13 | ,000.00 | \$13,000.00 |
| Exa | | | | d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcyc | | | |
| | | | | n for all of your entries from Part 2, including that number here | | > | \$48,000.00 |
| art 3 | : Descri | be Your Persona | al and Household Ite | ems | | | |
| Oo y | ou own o | or have any leç | gal or equitable in | terest in any of the following items? | | <u> </u> | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| \Box | kamples: No | goods and full Major appliance scribe | | , china, kitchenware | | | · |
| | | - | Misc Househal | d Goods (Bedroom Furniture, Kitchen <i>A</i> | Annliances | | |
| | | | tables, chairs, s | | appliatioes, | | \$1,000.00 |

Official Form 106A/B Schedule A/B: Property

page 2

| | | Case 17-0 | | Doc 1 | Filed 03/29/17 Document | Entered 03/29/17 16:0 Page 13 of 68 | 4:23 I | Desc Main |
|--------------|--|--|------------|-----------------|---|--|--------------|---|
| Debt Debt | | Carlos Murillo Rosa Murillo | o, Sr. | | | Case number (| if known) _ | |
| E | l No | es: Televisions and including cell p | Consur | ameras, med | ia players, games nics (Including Tele | oment; computers, printers, scanners | ; music coll | |
| | | | Games | , Phones, S | Stereos) | | | \$250.00 |
| E | xample No | oles of value es: Antiques and fi other collection Describe | | | | oks, pictures, or other art objects; sta | mp, coin, o | r baseball card collections; |
| E | xample No | ent for sports and es: Sports, photog musical instrur Describe | raphic, ex | | other hobby equipment; | bicycles, pool tables, golf clubs, skis; | canoes an | d kayaks; carpentry tools; |
| _ | No | | shotguns | s, ammunitior | n, and related equipmen | t | | |
| | l No | | hes, furs, | , leather coats | s, designer wear, shoes | , accessories | | |
| | | [| Used C | lothing | | | | \$100.00 |
| _ | l No | les: Everyday jew | ,· | , , | | ding rings, heirloom jewelry, watches | , gems, gol | d, silver \$200.00 |
| | | L | WISC. C | ostume Je | weiry | | | \$200.00 |
| 14. | Examp I _{No} I Yes. Any otl I _{No} | rm animals bles: Dogs, cats, bi Describe her personal and Give specific inform | househo | old items you | u did not already list, i | ncluding any health aids you did n | ot list | |
| 15. | | | | | om Part 3, including a | ny entries for pages you have attad | :hed | \$1,550.00 |
| Part | | scribe Your Financi | | uitable inter | est in any of the follow | ving? | | Current value of the |
| <i>5</i> 0 y | ou ow | Of Have ally let | yai oi eq | anabic iiildi | oot in any or the follow | g. | | portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 3

claims or exemptions.

Case 17-09932 Filed 03/29/17 Entered 03/29/17 16:04:23 Page 14 of 68 Document Carlos Murillo, Sr. Debtor 1 Debtor 2 Rosa Murillo Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash on Hand \$100.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$497.00 Checking Chase Chase \$500.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Doc 1

☐ Yes. Give specific information about them...

Desc Main

| Debtor 2 | | Case 17-09932 | Doc 1 | | Entered 03/29/17 Page 15 of 68 | 16:04:23 | Desc Main |
|--|--------------------------------------|--|-----------------------------------|---------------------------|-----------------------------------|---------------------|---|
| Examples: Interest domain names, websites, proceeds from royalties and licensing agreements No Ves. Give specific information about them 77. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Ves. Give specific information about them Money or property owed to you? Current value of th portion you own? Do not deduct secur claims or exemption No Ves. Give specific information about them, including whether you already filed the returns and the tax years Estimated 2016 Federal Income Tax Refund [Will be Intercepted] \$4,80 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Ves. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Ves. Give specific information 11. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Ves. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refuncy value: 22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because | | • | | | 9 | umber (if known) | |
| No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct security on the portion of the | Examp ■ No □ Yes. | oles: Internet domain names Give specific information al | bout them | roceeds from royalties a | | | |
| Portion you won? Do not deduct securclaims or exemption 28. Tax refunds owed to you No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years Estimated 2016 Federal Income Tax Refund [Will be Intercepted] \$4,80 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No □ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No □ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No □ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refunctable. Surrender or refunctable. Surrender or refunctable. Surrender or refunctable. If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | ■ No | | | cooperative association | nholdings, liquor licenses, pro | ofessional license | es |
| Stamples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement settlement, property settlement no property settlement settlement, property settlement settlement, property settlement settlement settlement, property settlement, property settlement settlement, property settlemen | Money or p | property owed to you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Pamily support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refunctivalue: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | □ No | | oout them, inc | cluding whether you alrea | ady filed the returns and the t | ax years | |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | | | | | | | \$4,800.0 |
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | Examp No Yes. (30. Other a Examp | Give specific information amounts someone owes y bles: Unpaid wages, disabilit benefits; unpaid loans | ' ou ty insurance p | payments, disability bene | | | |
| Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | Examp | | e insurance; h | nealth savings account (k | HSA); credit, homeowner's, o | r renter's insuran | ce |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. | ☐ Yes. N | | | olicy and list its value. | Beneficiary: | | Surrender or refund value: |
| ■ No □ Yes. Give specific information | If you a someon | are the beneficiary of a living one has died. | | | | ly entitled to rece | ive property because |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim | Examp ■ No | oles: Accidents, employmen | | | | yment | |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No □ Yes. Describe each claim | 34. Other c | contingent and unliquidate | ed claims of | every nature, including | g counterclaims of the debt | or and rights to | set off claims |
| 35. Any financial assets you did not already list ■ No □ Yes. Give specific information | ■ No | • | already list | | | | |

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| Debtor 1 Debtor 2 | Carlos Murillo, Sr. Rosa Murillo | 1 ago 10 01 | Case number (if known) | |
|----------------------|--|----------------------------|------------------------------|--------------|
| Debioi 2 | ROSA MIUTITO | | Case Humber (II known) | |
| | the dollar value of all of your entries from Part 4, includin Part 4. Write that number here | | | \$5,897.00 |
| Part 5: Do | escribe Any Business-Related Property You Own or Have an Inter | est In. List any real esta | ate in Part 1. | |
| 37. Do you | own or have any legal or equitable interest in any business-relate | ed property? | | |
| ■ No. G | Go to Part 6. | | | |
| ☐ Yes. | Go to line 38. | | | |
| | | | | |
| | escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | st In. | |
| 46. Do yo | u own or have any legal or equitable interest in any farm- | or commercial fishin | g-related property? | |
| ■ No | o. Go to Part 7. | | | |
| ☐ Ye | ss. Go to line 47. | | | |
| Part 7: | Describe All Property You Own or Have an Interest in That You | u Did Not List Above | | |
| Exam ■ No | bu have other property of any kind you did not already list apples: Season tickets, country club membership . Give specific information | ? | | |
| 54. Add | the dollar value of all of your entries from Part 7. Write th | at number here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part | 1: Total real estate, line 2 | | | \$149,566.00 |
| 56. Part | 2: Total vehicles, line 5 | \$48,000.00 | - | |
| 57. Part | 3: Total personal and household items, line 15 | \$1,550.00 | | |
| 58. Part | 4: Total financial assets, line 36 | \$5,897.00 | | |
| 59. Part | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part | 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part | 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. Tota | ll personal property. Add lines 56 through 61 | \$55,447.00 | Copy personal property total | \$55,447.00 |
| 63. Tota | al of all property on Schedule A/B. Add line 55 + line 62 | | | \$205,013.00 |

Official Form 106A/B Schedule A/B: Property page 6

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| | | | III FAU C 17 OFOO | |
|---------------------|--------------------------|-------------------|------------------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Carlos Murillo, Si | r. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Rosa Murillo | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | _ | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify th | e Property | You Claim | as Exempt |
|---------|-------------|------------|-----------|-----------|
| | | | | |

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------|---|--|--|
| Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| \$149,566.00 | | | 735 ILCS 5/12-901 |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$17,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$100.00 | | 100% | 735 ILCS 5/12-1001(a) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| | | 100% of fair market value, up to | |
| | \$149,566.00 \$149,566.00 \$17,000.00 \$1,000.00 | \$17,000.00 \$100.00 \$100.00 \$100.00 \$\$100.00 \$\$\$\$\$\$\$\$\$\$ | Check only one box for each exemption. Schedule A/B \$149,566.00 100% of fair market value, up to any applicable statutory limit \$17,000.00 \$1,000.00 \$2,400.00 |

Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Page 18 of 68 Document Carlos Murillo, Sr.

Rosa Murillo Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash on Hand 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Chase 735 ILCS 5/12-1001(b) \$497.00 \$497.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Estimated 2016 Federal Income Tax** 735 ILCS 5/12-1001(b) \$4,800.00 \$4,800.00 Refund [Will be Intercepted] Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit **Estimated 2016 Federal Income Tax** 735 ILCS 5/12-1001(g)(1) \$4,800.00 \$0.00 Refund [Will be Intercepted] Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Debtor 1

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| | | Document Page | : 19 of 68 | | |
|------------------------------|-----------------------|--|---|-------------------------|-------------------|
| Fill in this information | tion to identify yοι | ır case: | | | |
| Debtor 1 | Carlos Murillo, | Sr. | | | |
| | First Name | Middle Name Last Name | e | - | |
| Debtor 2 | Rosa Murillo | | | _ | |
| (Spouse if, filing) | First Name | Middle Name Last Name | е | | |
| United States Bankı | ruptcy Court for the | : NORTHERN DISTRICT OF ILLINOIS | | _ | |
| Case number | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | led filing |
| Official Forms | 40CD | | | | |
| Official Form | | | | | |
| Schedule D | : Creditors | Who Have Claims Secu | red by Propert | У | 12/15 |
| | | If two married people are filing together, both ar out, number the entries, and attach it to this for | | | |
| . Do any creditors ha | ive claims secured b | y your property? | | | |
| | | his form to the court with your other schedule | s. You have nothing else | to report on this form. | |
| _ | Il of the information | · | 3.00 | ., | |
| | | below. | | | |
| | Secured Claims | | . Column A | Column B | Column C |
| | | more than one secured claim, list the creditor separs a particular claim, list the other creditors in Part 2. | ately | Value of collateral | Unsecured |
| | | ical order according to the creditor's name. | Do not deduct the | that supports this | portion |
| 2.1 Ally Financi | ial | Describe the property that secures the claim: | value of collateral. \$20,748.00 | claim \$18,000.00 | If any \$2,748.00 |
| Creditor's Name | | 2013 Chevrolet Equinox 35000 miles | _ | | |
| | | Son Drives and Pays | | | |
| 000 D | | As of the date you file, the claim is: Check all that | at | | |
| 200 Renaiss Detroit, MI 4 | | apply. | | | |
| | ty, State & Zip Code | ☐ Contingent | | | |
| Number, Street, Cr | ty, State & Zip Code | ☐ Unliquidated☐ Disputed | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage of | or secured | | |
| Debtor 2 only | | car loan) | | | |
| ☐ Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | n) | | |
| ☐ At least one of the | debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim | | Other (including a right to offset) | | | |
| community debt | | | | | |
| | Opened | | | | |
| | 05/16 Last | | | | |
| Date debt was incurr | Active ed 7/22/16 | Last 4 digits of account number 56 | 41 | | |
| Date debt was incurr | | Last 4 digits of account number | | | |
| 2.2 Capital One | Auto Finan | Describe the property that secures the claim: | \$19,025.00 | \$17,000.00 | \$2,025.00 |
| Creditor's Name | | 2016 Kia Sol 5000 miles | 7 | | |
| | | Motor Vehicle: | | | |
| | | As of the date you file, the claim is: Check all that | at | | |
| 3901 Dallas Plano, TX 7 | | apply. | | | |
| | | Contingent | | | |
| inumber, Street, Cr | ty, State & Zip Code | ☐ Unliquidated☐ Disputed | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage of | or secured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and Debto | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | n) | | |

☐ Judgment lien from a lawsuit

☐ At least one of the debtors and another

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| Debtor 1 Carlos Murillo, Sr. | | Case number (if know) | | |
|---|---|-----------------------|---|----------------|
| First Name Middle N | ame Last Name | | | |
| Debtor 2 Rosa Murillo First Name Middle N | lame Last Name | | | |
| · iiot i taille | 245.114.115 | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Opened 07/16 Last | | | | |
| Active | | | | |
| Date debt was incurred 8/22/16 | Last 4 digits of account number 100 | 1 | | |
| 2.3 Pennymac Loan Services | Describe the property that secures the claim: | \$139,592.00 | \$149,566.00 | \$0.00 |
| Creditor's Name | 12208 S Lawndale Alsip, IL 60803 | 1 | Ψ140,000.00 | Ψ0.00 |
| | Cook County | | | |
| | As of the date you file, the claim is: Check all that | | | |
| 6101 Condor Dr | apply. | | | |
| Moorpark, CA 93021 | Contingent | | | |
| Number, Street, City, State & Zip Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| _ | ☐ An agreement you made (such as mortgage or | angurad | | |
| Debtor 1 only | car loan) | secured | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | |
| community debt | | | | |
| Opened | | | | |
| 06/15 Last | | | | |
| Active | | | | |
| Date debt was incurred 8/13/16 | Last 4 digits of account number 211 | 3 | | |
| 2.4 Wfds | Describe the property that secures the claim: | \$15,054.00 | \$13,000.00 | \$2,054.00 |
| Creditor's Name | Cruz 2014 Chevy | 1 | • • • • • • • • • • • • • • • • • • • | +-, |
| | , | | | |
| | As of the date you file, the claim is: Check all that | J | | |
| Po Box 1697 | apply. | | | |
| Winterville, NC 28590 | Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only | ☐ An agreement you made (such as mortgage or | secured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) |) | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | | | | |
| Opened | | | | |
| 07/14 Last | | | | |
| Active | Last 4 digits of account number 523 | 2 | | |
| Date debt was incurred 1/04/17 | Last 4 digits of account number 523 | <u> </u> | | |
| | | | | |
| Add the dollar value of your entries in C | Column A on this page. Write that number here: | \$194,419.0 | 0 | |
| If this is the last page of your form, add | | \$194,419.0 | _ | |
| Write that number here: | | φ194,419.U | | |
| | | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is

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| Debtor 1 | Carlos Murillo, Sr | - | | Case number (if know) |
|----------|--------------------|-------------|-----------|-----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Rosa Murillo | | | |
| | First Name | Middle Name | Last Name | |

trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Page 22 of 68 Document Fill in this information to identify your case: Debtor 1 Carlos Murillo, Sr. Middle Name Last Name First Name Debtor 2 Rosa Murillo (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$5.000.00 \$5.000.00 \$0.00 Priority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **Taxes** Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Carlos Murillo, Sr.

| Debto | or 2 Rosa Murillo | Case number (if know) | | | | |
|-------|---|---|--|------------|--|--|
| 4.1 | Cap1/I&t Nonpriority Creditor's Name | Last 4 digits of account number | 7038 | \$1,148.00 | | |
| | Po Box 30253 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 10/10 Last Active 10/27/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Charge Acc | count | | | |
| 4.2 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 7658 | \$3,082.00 | | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 11/15 Last Active 8/24/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.3 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 7454 | \$2,510.00 | | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 11/15 Last Active 8/22/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims | · | | | |
| | No | Debts to pension or profit-sharin | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |

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| Debtor Debtor | 1 Carlos Murillo, Sr. 2 Rosa Murillo | | Case number (if know) | | | |
|------------------|--|---|--|------------|--|--|
| 4.4 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 3964 | \$3,312.00 | | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 08/12 Last Active 10/13/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | d claim: ration agreement or divorce that you did not | | | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card | | | | |
| 4.5 | Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 0678 | \$3,252.00 | | |
| | 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 11/15 Last Active 10/27/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin | ration agreement or divorce that you did not | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.6 | Chase Card Nonpriority Creditor's Name | Last 4 digits of account number | 2133 | Unknown | | |
| | Po Box 15298 Wilmington, DE 19850 | When was the debt incurred? | Opened 4/01/07 Last Active 7/16/08 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing | ration agreement or divorce that you did not | | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | | | |

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| Debto | pr 2 Rosa Murillo | Case number (if know) | | | | |
|-------|--|---|--|------------|--|--|
| 4.7 | Check into Cash | Last 4 digits of account number | | \$2,000.00 | | |
| | Nonpriority Creditor's Name 1637 S Cicero | When was the debt incurred? | | | | |
| | Cicero, IL 60804 Number Street City State Zlp Code | As of the date you file, the claim | | | | |
| | Who incurred the debt? Check one. | _ | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify | | | | |
| 4.8 | Comenity Bank/avenue Nonpriority Creditor's Name | Last 4 digits of account number | 8524 | \$1,573.00 | | |
| | Po Box 182789 Columbus, OH 43218 | When was the debt incurred? | Opened 04/11 Last Active 10/13/16 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| | Who incurred the debt? Check one. | , | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | |
| | Debtor 1 and Debtor 2 only | | | | | |
| | ☐ At least one of the debtors and another | | | | | |
| | ☐ Check if this claim is for a community | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | | | | |
| | Yes | Other. Specify Charge Acc | count | | | |
| 4.9 | Comenity Bank/express Nonpriority Creditor's Name | Last 4 digits of account number | 2884 | \$1,459.00 | | |
| | Po Box 182789 Columbus, OH 43218 | When was the debt incurred? | Opened 05/13 Last Active 9/09/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | |
| | ■ Debtor 1 only | | | | | |
| | Debtor 2 only | ☐ Debtor 2 only ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | |
| | ☐ At least one of the debtors and another | | | | | |
| | ☐ Check if this claim is for a community ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | count | | | | |

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| Debtor Debtor | 1 Carlos Murillo, Sr. 2 Rosa Murillo | | Case number (if know) | |
|------------------|--|---|--|------------|
| 4.1 | Comenity Bank/Inbryant | Last 4 digits of account number | 8088 | \$855.00 |
| | Nonpriority Creditor's Name 4590 E Broad St Columbus, OH 43213 | When was the debt incurred? | Opened 02/16 Last Active 10/07/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.1 | Comenity Bank/nwyrk&co Nonpriority Creditor's Name | Last 4 digits of account number | 0494 | \$1,694.00 |
| | 220 W Schrock Rd Westerville, OH 43081 | When was the debt incurred? | Opened 07/10 Last Active 10/07/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | Yes | ■ Other. Specify Charge Acc | count | |
| 4.1 | Comenity Bank/vctrssec Nonpriority Creditor's Name | Last 4 digits of account number | 8388 | \$621.00 |
| | Po Box 182789 Columbus, OH 43218 | When was the debt incurred? | Opened 05/13 Last Active 9/30/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another ☐ Type of NONPRIORITY unsecured claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | \square Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |

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| | 1 Carlos Murillo, Sr. 2 Rosa Murillo | | Case number (if know) | | | |
|----------|--|---|--|------------|--|--|
| 4.1 | Comenitycapital/mprcc | Last 4 digits of account number | 6748 | \$1,012.00 | | |
| | Nonpriority Creditor's Name Po Box 182120 Columbus, OH 43218 | When was the debt incurred? | Opened 03/16 Last Active 10/27/16 | | | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | | |
| | Yes | Other. Specify Charge Acc | count | | | |
| 4.1 | Comenitycapital/ulta Nonpriority Creditor's Name | Last 4 digits of account number | 4818 | \$502.00 | | |
| | Po Box 182120 Columbus, OH 43218 | When was the debt incurred? | Opened 09/16 Last Active 10/20/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | ■ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | |
| | \square At least one of the debtors and another | | | | | |
| | \square Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | ■ No | Debts to pension or profit-sharin | 51 <i>,</i> | | | |
| | Yes | Other. Specify Charge Acc | count | | | |
| 4.1 5 | Credit One Bank Na Nonpriority Creditor's Name | Last 4 digits of account number | 4237 | \$1,557.00 | | |
| | Po Box 98872 Las Vegas, NV 89193 | When was the debt incurred? | Opened 09/11 Last Active 7/14/16 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | eet City State Zlp Code As of the date you file, the claim is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | | | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | | | |

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| | 1 Carlos Murillo, Sr. 2 Rosa Murillo | | Case number (if know) | | | | |
|-----|--|---|---|------------|--|--|--|
| 4.1 | Dsnb Macys | Last 4 digits of account number | 0900 | \$2,688.00 | | | |
| | Nonpriority Creditor's Name | _ | | | | | |
| | 9111 Duke Blvd Mason, OH 45040 | When was the debt incurred? | Opened 04/13 Last Active 8/13/16 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | g out of a separation agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | |
| 4.1 | Enhanced Recovery Co L | Last 4 digits of account number | 7262 | \$216.00 | | | |
| | Nonpriority Creditor's Name 8014 Bayberry Rd | When was the debt incurred? | Opened 09/12 | | | | |
| | Jacksonville, FL 32256 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | _ | ☐ Student loans | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa | | | | | |
| | ■ No | Debts to pension or profit-sharin | | | | | |
| | Yes | Other. Specify Collection | | | | | |
| 4.1 | _ | | | | | | |
| 8 | Famsa Nonpriority Creditor's Name | Last 4 digits of account number | | \$3,745.00 | | | |
| | 2727 Lbj Fwy Ste 500 Dallas, TX 75234 | When was the debt incurred? | Opened 8/30/16 Last Active 08/16 | | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | _ | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | ☐ Yes | Other. Specify Installment | Sales Contract | | | | |

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| Debt | Rosa Murillo Case number (if know) | | |
|----------|--|---|------------|
| 4.1 | Illinois Donortmont of Bossons | | University |
| 9 | Illinois Department of Revenue Nonpriority Creditor's Name | Last 4 digits of account number | Unknown |
| | Bankruptcy Section PO Box 64338 | When was the debt incurred? | |
| | Chicago, IL 60664-0338 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | _ | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Notice Only | |
| 4.2 | Illinois Dept of Employment Securit | Last 4 digits of account number Notic Only | Unknown |
| 0] | Nonpriority Creditor's Name | Last 4 digits of account number Notic Only | OHRHOWH |
| | Bankruptcy Unit Collection Subdivis | When was the debt incurred? | |
| | 33 S State St 10th Floor | | |
| | Chicago, IL 60603 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Notice Only | |
| | | — Other. Specify | |
| 4.2 1 | Internal Revenue Service | Last 4 digits of account number | Unknown |
| | Nonpriority Creditor's Name PO Box 7346 | When was the debt incurred? | |
| | Philadelphia, PA 19101-7346 | When was the dept incurred: | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Notice Only | |

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| btor 2 Rosa Murillo Rosa Murillo | | Case number (if know) | |
|---|--|---|------------|
| Irf/pioneer | Last 4 digits of account number | 7112 | \$3,386.00 |
| Nonpriority Creditor's Name 6520 Indian River Rd Virginia Beach, VA 23464 | When was the debt incurred? | Opened 8/05/16 Last Active 08/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Installment | Sales Contract | |
| Kohls/capone Nonpriority Creditor's Name | Last 4 digits of account number | 0561 | \$725.00 |
| N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 | When was the debt incurred? | Opened 10/13 Last Active 8/09/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Charge Acc | count | |
| Nordstrom/td | Last 4 digits of account number | 0967 | \$1,894.00 |
| Nonpriority Creditor's Name 13531 E Caley Ave Englewood, CO 80111 | When was the debt incurred? | Opened 01/15 Last Active 10/21/16 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | I | |

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| | r 1 Carlos Murillo, Sr. Rosa Murillo | | Case number (if know) | |
|-----|--|---|--|------------|
| .2 | Syncb/care Credit | Last 4 digits of account number | 7225 | \$3,043.00 |
| | Nonpriority Creditor's Name C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 08/13 Last Active 10/27/16 | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Charge Acc | count | |
| 1.2 | Syncb/gap Nonpriority Creditor's Name | Last 4 digits of account number | 9622 | \$1,057.00 |
| | Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | Opened 12/12 Last Active 8/29/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| .2 | Syncb/gap Nonpriority Creditor's Name | Last 4 digits of account number | 4327 | \$945.00 |
| | Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | Opened 03/16 Last Active 10/27/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Charge Acc | ount | |
| | | = Cition Opcomy | | |

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| | r 1 Carlos Murillo, Sr. Rosa Murillo | | Case number (if know) | |
|----|---|--|--|------------|
| .2 | Syncb/jcp | Last 4 digits of account number | 1744 | \$1,486.00 |
| | Nonpriority Creditor's Name Po Box 965007 Orlando, FL 32896 | When was the debt incurred? | Opened 12/13 Last Active 9/01/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Charge Acc | count | |
| .2 | Syncb/lenscrafters Nonpriority Creditor's Name | Last 4 digits of account number | 9673 | \$1,123.00 |
| | C/o Po Box 965036 Orlando, FL 32896 | When was the debt incurred? | Opened 02/16 Last Active 9/05/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Charge Acc | count | |
| .3 | Syncb/lowes Nonpriority Creditor's Name | Last 4 digits of account number | 9653 | \$1,591.00 |
| | Po Box 956005 Orlando, FL 32896 | When was the debt incurred? | Opened 08/15 Last Active 8/29/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Charge Acc | count | |
| | | | · | |

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| | or 2 Rosa Murillo | | Case number (if know) | | |
|----|---|--------------------------------------|---|----------|--|
| .3 | Syncb/old Navy | Last 4 digits of account number | 2588 | \$412.00 | |
| | Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896 | When was the debt incurred? | Opened 10/10 Last Active 3/03/16 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | No | Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify Charge Acc | count | | |
| .3 | Syncb/walmart Nonpriority Creditor's Name | Last 4 digits of account number | 5517 | \$879.00 | |
| | Po Box 965024 Orlando, FL 32896 | When was the debt incurred? | Opened 11/16 Last Active 2/15/17 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Charge Acc | count | | |
| .3 | Thd/cbna Nonpriority Creditor's Name | Last 4 digits of account number | 7657 | \$782.00 | |
| | Po Box 6497 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 07/15 Last Active 7/13/16 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify Charge Acc | count | | |
| | | | | | |

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| 72 Rosa Murillo | | Case number (if know) | |
|--|---|--|------------|
| Turner Acceptance Crp | Last 4 digits of account number | 3167 | \$4,215.00 |
| Nonpriority Creditor's Name 5900 W Howard St Skokie, IL 60077 | When was the debt incurred? | Opened 08/16 Last Active 8/31/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| Turner Acceptance Crp | Last 4 digits of account number | 5315 | \$2,066.00 |
| Nonpriority Creditor's Name 5900 W Howard St Skokie, IL 60077 | When was the debt incurred? | Opened 11/16 Last Active 1/31/17 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | | |
| Vw Credit Inc | Last 4 digits of account number | 4866 | Unknow |
| Nonpriority Creditor's Name 1401 Franklin Blvd Libertyville, IL 60048 | When was the debt incurred? | Opened 01/04 Last Active 12/29/08 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Automobile | • | |

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| | Rosa Mur | | | Case r | number (if know) | | |
|---------------------|--------------------------------|--|--|---------------|---------------------------------------|-------------------------|--|
| 1 | Wffnb Retai | | Last 4 digits of account number | 0038 | <u> </u> | \$629.00 | |
| ı | Po Box 944 Las Vegas, | 98 | When was the debt incurred? | Oper 10/09 | ned 08/16 Last Active 9/16 | | |
| | | City State ZIp Code the debt? Check one. | As of the date you file, the claim i | s: Check | k all that apply | | |
| I | Debtor 1 onl | ly | ☐ Contingent | | | | |
| ı | ■ Debtor 2 onl | ly | ☐ Unliquidated | | | | |
| I | Debtor 1 and | d Debtor 2 only | Disputed | | | | |
| I | At least one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | | s claim is for a community | ☐ Student loans | | | | |
| C | debt | bject to offset? | Obligations arising out of a sepa report as priority claims | ration ag | greement or divorce that you did not | | |
| | ■ No | | Debts to pension or profit-sharin | g plans, | and other similar debts | | |
| I | ☐ Yes | | ■ Other. Specify Charge Acc | | | | |
| 4.3 | Zale Delawa | are Inc/sj | Last 4 digits of account number | 3151 | | \$2,184.00 | |
| | Nonpriority Cred | ditor's Name | | | | | |
| | 375 Ghent F Fairlawn, O | | When was the debt incurred? | 9/22/ | ned 08/16 Last Active | | |
| | | City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | |
| ١ | Who incurred t | the debt? Check one. | | | | | |
| I | Debtor 1 onl | ly | ☐ Contingent | | | | |
| I | Debtor 2 onl | ly | ☐ Unliquidated | | | | |
| I | Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | | |
| ı | At least one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | | s claim is for a community | ☐ Student loans | | | | |
| C | debt | bject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| I | No | | Debts to pension or profit-sharin | g plans, | and other similar debts | | |
| I | ☐ Yes | | ■ Other. Specify Charge Acc | ount | | | |
| Part 3: | List Others | s to Be Notified About a Debt | That You Already Listed | | | | |
| is trying have m | g to collect fro | m you for a debt you owe to some | ut your bankruptcy, for a debt that yeone else, list the original creditor in ou listed in Parts 1 or 2, list the addiubmit this page. | Parts 1 | or 2, then list the collection agency | here. Similarly, if you | |
| Part 4: | Add the A | mounts for Each Type of Unse | cured Claim | | | | |
| | ne amounts of unsecured cla | | . This information is for statistical re | eporting | purposes only. 28 U.S.C. §159. Add | the amounts for each | |
| | | | | | Total Claim | | |
| To clai | 6a. otal | Domestic support obligations | | 6a. | \$0.00 | | |
| from Pa | | Taxes and certain other debts ye | ou owe the government | 6b. | \$ 5,000.00 | | |
| | 6c. | Claims for death or personal inju | ury while you were intoxicated | 6c. | \$ 0.00 | | |
| | 6d. | Other. Add all other priority unsect | ured claims. Write that amount here. | 6d. | \$ 0.00 | | |
| | 6e. | Total Priority. Add lines 6a throug | h 6d. | 6e. | \$5,000.00 | | |
| | | | | | Total Claim | | |
| To | 6f. | Student loans | | 6f. | \$0.00 | | |

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Debtor 1 Carlos Murillo, Sr. Debtor 2 Rosa Murillo Case number (if know) from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 57,643.00 Total Nonpriority. Add lines 6f through 6i. 57,643.00

Official Form 106 E/F

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-----------------|
| Debtor 1 | Carlos Murillo, S | 1. | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Rosa Murillo | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this |
| | | | | amended filir |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı | Person or | company with | whom you have the r, Street, City, State and ZIF | e contract or lease | State what the contract or lease is for | | | |
|-----|-----------|--------------|---|---------------------|---|--|--|--|
| 2.1 | | | | | | | | |
| | Name | | | | | | | |
| | Number | Street | | | | | | |
| | City | | State | ZIP Code | _ | | | |
| 2.2 | | | | | | | | |
| | Name | | | | | | | |
| | Number | Street | | | <u> </u> | | | |
| | City | | State | ZIP Code | <u> </u> | | | |
| 2.3 | Oity | | Olate | Zii Oddc | | | | |
| 0 | Name | | | | | | | |
| | Number | Street | | | _ | | | |
| | City | | State | ZIP Code | _ | | | |
| 2.4 | | | | | | | | |
| | Name | | | | _ | | | |
| | Number | Street | | | _ | | | |
| | City | | State | ZIP Code | <u> </u> | | | |
| 2.5 | City | | Olato | 211 0000 | | | | |
| 0 | Name | | | | _ | | | |
| | Number | Street | | | _ | | | |
| | City | | State | ZIP Code | <u> </u> | | | |

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| | | Docum | ent Page 38 d | of 68 | |
|--------------------------------|---|--|--------------------------|---|------------------------------------|
| Fill in this i | information to identify your | case: | | | |
| Debtor 1 | Carlos Murillo, Sr | | | | |
| 5 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing | Rosa Murillo First Name | Middle Name | Last Name | | |
| | 5, | | | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRIC | I OF ILLINOIS | | |
| Case numb | er | | | | |
| (if known) | | | | ☐ Check if thi | |
| | | | | amended fi | lling |
| Official | Form 106H | | | | |
| | ule H: Your Cod | ohtors | | | 12/15 |
| Jeneur | die II. Tour Cou | CDIOI 3 | | | 12/13 |
| | and case number (if known) | , , | | as a codebtor. | |
| ■ No □ Yes | | | | | |
| | in the last 8 years, have you a, California, Idaho, Louisiana, | | | y? (Community property states and territories ngton, and Wisconsin.) | include |
| ■ Na. 7 | 0. 4. 1 | | | | |
| | Go to line 3. Did your spouse, former spou | ise or legal equivalent liv | e with you at the time? | | |
| □ 1es. | Did your spouse, former spou | ise, or legal equivalent in | re with you at the time! | | |
| in line 2 Form 1 out Col | 2 again as a codebtor only i | f that person is a guara Form 106E/F), or Sched | ntor or cosigner. Make | if your spouse is filing with you. List the property of the property of the creditor on Schedule GO. Use Schedule D, Schedule E/F, or Schedule 2: The creditor to whom you on Check all schedules that apply: | ule D (Official edule G to fill |
| | | | | | |
| 3.1 | lomo | | | _ Schedule D, line | |
| IN | lame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| | lumber Street City | State | ZIP Code | | |
| 3.2 | | | | Cohodulo D. lin- | |
| | lame | | | □ Schedule D, line □ Schedule E/F, line | |
| | | | | ☐ Schedule C/I , line | |
| | lumber Street | | | , · · | |
| | City | State | ZIP Code | | |

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| C:II | in this information | to identify your o | | | • |
|-------------|--|--|---|-------------------------------------|--|
| | in this information of | Carlos Muril | | | |
| | otor 2 buse, if filing) | Rosa Murillo |) | | |
| | | otcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | |
| | se number | | | - | Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: |
| 0 | fficial Form | <u> 1061</u> | | | MM / DD/ YYYY |
| S | chedule I: | Your Inc | ome | | 12/15 |
| spo atta | use. If you are seponded to the control of the cont | parated and you let to this form. the Employment | r spouse is not filing wi | ith you, do not include informati | ing with you, include information about your on about your spouse. If more space is needed, I case number (if known). Answer every question. |
| 1. | Fill in your emplinformation. | loyment | | Debtor 1 | Debtor 2 or non-filing spouse |
| | If you have more | • | Employment status | ■ Employed | ■ Employed |
| | attach a separate | 1 0 | Employment status | ☐ Not employed | ☐ Not employed |
| | employers. | | Occupation | Forklift Driver | Uber/Lyft |
| | Include part-time self-employed wo | | Employer's name | Ryder Integrated Logistics | |
| | Occupation may or homemaker, if | | Employer's address | | |
| | | | How long employed to | here? 1 Year | |
| Par | t 2: Give De | etails About Mor | nthly Income | | |
| | mate monthly incuse unless you are | | ate you file this form. If | you have nothing to report for any | ine, write \$0 in the space. Include your non-filing |
| | u or your non-filing e space, attach a s | | | ombine the information for all empl | oyers for that person on the lines below. If you need |
| | | | | | For Debtor 1 For Debtor 2 or non-filing spouse |
| 2. | | | ry, and commissions (b calculate what the monthl | | 4,201.57 \$ 861.00 |

3.

+\$

\$

0.00

4,201.57

0.00

861.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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| Debto | | Rosa Murillo | | | Case | number (if known | n) _ | | | |
|-------|--------------------|--|----------|-----|-----------|------------------|----------|-----|---------------------------|--------------|
| | | | | | For | Debtor 1 | | | Debtor 2 or filing spouse | |
| | Cop | by line 4 here | 4. | | \$ | 4,201.5 | 7 | \$ | 861.00 | |
| 5. | l ist | t all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 58 | 2 | \$ | 994.0 | n | \$ | 130.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5k | | \$ - | 0.0 | _ | \$— | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$_ | 0.0 | _ | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$_ | 0.0 | _ | \$ | 0.00 | |
| | 5e. | Insurance | 56 | Э. | \$_ | 151.3 | | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f | f | \$ | 0.0 | _ | \$ | 0.00 | |
| | 5g. | Union dues | 50 | g. | \$ | 0.0 | 0 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: | 5h | ո.+ | \$ | 0.0 | + | \$ | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 1,145.3 | 3_ | \$ | 130.00 | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 3,056.2 | 4_ | \$ | 731.00 | |
| | List 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 88 | a. | \$ | 0.0 | n | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8k | | \$_ | 0.0 | _ | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | С. | \$ | 0.0 | 0 | \$ | 0.00 | |
| | 8d. | Unemployment compensation | 80 | d. | \$ | 0.0 | 0 | \$ | 0.00 | |
| | 8e. | Social Security | 86 | Э. | \$ | 0.0 | 0 | \$ | 0.00 | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f 8g | | \$_ \$ | 0.0 | _ | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | | n.+ | \$ | | <u> </u> | \$ | 0.00 | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$ | 0.0 | 0 | \$ | 0.00 | |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 3.056.24 + | \$ | 7 | 31.00 = \$ | 3.787.24 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | | 0,000.24 | _ | | | 0,101124 |
| | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | dep | | | | , | | chedule J. 11. +\$ | 0.00 |
| | | the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies | | | | | | | 12. \$ | 3,787.24 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | Combin monthly | ed income |
| | | No. Yes. Explain: | | | | | | | | |

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| | in this informa | tion to identify yo | our caca: | | | 1 | | | |
|------------|--|---|--|---|--|---|-----------------|-------------------------------|--|
| | | | | | | | | | |
| Deb | tor 1 | Carlos Muril | lo, Sr. | | | Check if this is: An amended filing | | | |
| Debt | tor 2 buse, if filing) | Rosa Murillo |) | | | A supplement showing postpetition chapter 13 expenses as of the following date: | | | |
| Unite | ed States Bankr | uptcy Court for the | : NORTH | IERN DISTRICT OF ILLING | OIS | | MM / DD / YYYY | | |
| | e number nown) | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/1 | |
| Be a | as complete a ormation. If m nber (if know | and accurate as ore space is ne n). Answer ever | s possible. eded, atta ry question | If two married people are ch another sheet to this | | | | | |
| Part 1. | t 1: Descr Is this a joir | ibe Your House nt case? | ehold | | | | | | |
| | □ No. Go to | | | | | | | | |
| | Yes. Doe | s Debtor 2 live i | in a separa | ate household? | | | | | |
| | ■ N □ Y | | st file Offici | al Form 106J-2, <i>Expense</i> s | for Separate House | ehold of De | btor 2. | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | |
| | Do not list Debtor 2. | • | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | □No | |
| | dependents | names. | | | | | | ☐ Yes ☐ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No □ Yes | |
| 3. | | enses include | . • | No | | | | — 100 | |
| | | f people other t d your depende | han $_{oldsymbol{\square}}$ | Yes | | | | | |
| Part | | ate Your Ongoi | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | |
| the | | h assistance an | | government assistance it luded it on Schedule I: Y | | | Your exp | enses | |
| (011 | iloiai i oi iii i o | ,01., | | | | _ | | | |
| 4. | | or home owners and any rent for the | | ses for your residence. In r lot. | nclude first mortgag | e 4. | \$ | 1,135.00 | |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 | |
| | | rty, homeowner's | | | | 4b. | · | 0.00 | |
| | | maintenance, re owner's associat | • | ıpkeep expenses dominium dues | | 4c. 4d. | · | 100.00 0.00 | |
| 5. | | | | our residence, such as ho | me equity loans | 5. | · | 0.00 | |

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| Deb | | Carlos N | Murillo, Sr. | | | | | | |
|----------|-------------|-----------------|--|--------------------|------------------------|--------------------------|--|--|--|
| Debtor 2 | | Rosa Mu | urillo | Case num | Case number (if known) | | | | |
| | | | | | | | | | |
| 6. | Utilit | | | • | • | | | | |
| | 6a. | - | , heat, natural gas | 6a. | \$ | 220.00 | | | |
| | 6b. | | wer, garbage collection | 6b. | · | 75.00 | | | |
| | 6c. | • | e, cell phone, Internet, satellite, and cable services | 6c. | • | 350.00 | | | |
| _ | 6d. | Other. Spe | | 6d. | | 0.00 | | | |
| 7. | | | ekeeping supplies | 7. | · | 400.00 | | | |
| 8. | | | children's education costs | 8. | \$ | 0.00 | | | |
| 9. | | • | lry, and dry cleaning | 9. | · · · | 100.00 | | | |
| | | - | products and services | 10. | · | 100.00 | | | |
| | | | ntal expenses | 11. | \$ | 75.00 | | | |
| 12. | | | . Include gas, maintenance, bus or train fare. ar payments. | 12. | \$ | 150.00 | | | |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 | | | |
| 14. | Char | itable cont | tributions and religious donations | 14. | \$ | 50.00 | | | |
| 15. | Insu | rance. | | | | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | | | | | | |
| | 15a. | Life insura | ance | 15a. | | 0.00 | | | |
| | 15b. | Health ins | surance | 15b. | \$ | 0.00 | | | |
| | 15c. | Vehicle in: | surance | 15c. | \$ | 205.00 | | | |
| | 15d. | Other insu | urance. Specify: | 15d. | \$ | 0.00 | | | |
| 16. | Taxe | s. Do not in | nclude taxes deducted from your pay or included in lines 4 or 20. | | | | | | |
| | Spec | ify: | | 16. | \$ | 0.00 | | | |
| 17. | | | ease payments: | | | | | | |
| | | | ents for Vehicle 1 | 17a. | · | 349.00 | | | |
| | | | ents for Vehicle 2 | 17b. | * | 475.00 | | | |
| | | Other. Spe | - | 17c. | \$ | 0.00 | | | |
| | | Other. Spe | | 17d. | \$ | 0.00 | | | |
| 18. | | | of alimony, maintenance, and support that you did not repo | | c | 0.00 | | | |
| 40 | | | your pay on line 5, Schedule I, Your Income (Official Form 1 | 1 06I). 18. | · | | | | |
| 19. | | | s you make to support others who do not live with you. | | \$ | 0.00 | | | |
| 20 | Spec | , | anticonnance and included in lines 4 on 5 of this forms on an | 19. | | | | | |
| 20. | | | erty expenses not included in lines 4 or 5 of this form or on s on other property | 20a. | | 0.00 | | | |
| | | Real estat | | 20a. 20b. | · | | | | |
| | | | | 20b. 20c. | · | 0.00 | | | |
| | | | homeowner's, or renter's insurance | | · | 0.00 | | | |
| | | | nce, repair, and upkeep expenses | 20d. | * | 0.00 | | | |
| | | | ner's association or condominium dues | 20e. | | 0.00 | | | |
| 21. | Othe | r: Specify: | | 21. | | 0.00 | | | |
| 22. | Calc | ulate vour | monthly expenses | | | | | | |
| | | - | through 21. | | \$ | 3,784.00 | | | |
| | | | 2 (monthly expenses for Debtor 2), if any, from Official Form 10 | 6J-2 | \$ | | | | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 3,784.00 | | | |
| | 220. | Add IIIC ZZ | a and 22b. The result is your monthly expenses. | | Ψ | 3,784.00 | | | |
| 23. | | | monthly net income. | | | | | | |
| | | | 12 (your combined monthly income) from Schedule I. | 23a. | | 3,787.24 | | | |
| | 23b. | Copy your | r monthly expenses from line 22c above. | 23b. | -\$ | 3,784.00 | | | |
| | 00- | Ch.tt | | | | | | | |
| | 23C. | | our monthly expenses from your monthly income. t is your <i>monthly net income</i> . | 23c. | \$ | 3.24 | | | |
| ٠, | _ | | | | | | | | |
| 24. | | | an increase or decrease in your expenses within the year af | | | or decrease because of a | | | |
| | | | ou expect to finish paying for your car loan within the year or do you expe terms of your mortgage? | or your mongage | payment to increase | on decrease because of a | | | |
| | ■ No | | | | | | | | |
| | | | Explain here: | | | | | | |
| | □ 16 | ∪ ∂. | Explain Hele. | | | | | | |

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| Elli in this inform | | | | | 1 |
|---------------------------------|---|----------------------------|--------------|--|---|
| FIII IN this infor | mation to identify your | case: | | | |
| Debtor 1 | Carlos Murillo, Sr | | | | |
| | First Name | Middle Name | La | et Name | |
| Debtor 2 | Rosa Murillo | | | | |
| (Spouse if, filing) | First Name | Middle Name | La | st Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINO | IS | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| If two married po | eople are filing together | r, both are equally respor | nsible for s | or's Schedules supplying correct information. ed schedules. Making a false sta | tement, concealing property, or 000, or imprisonment for up to 20 |
| years, or both. 1 | 8 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | apicy out | o dan result in filles up to 4250, | oo, o. improoriment for up to 20 |
| Did you pa | y or agree to pay some | one who is NOT an attor | ney to help | you fill out bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. I | Name of person | | | | nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119) |
| that they ar X /s/ Car Carlos | e true and correct. los Murillo, Sr. Murillo, Sr. | that I have read the sum | • | chedules filed with this declarated with the declarated with this declarated with this declarated with this declarated with this declarated with the declar | , |
| | re of Debtor 1 | | | Signature of Debtor 2 | |

Date March 28, 2017

Date March 28, 2017

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| Fill in this infor | mation to identify you | r case: | | | |
|-------------------------------------|--------------------------------|---|---|--|---|
| Debtor 1 | Carlos Murillo, S | Sr. Middle Name | Last Name | | |
| Debtor 2 | Rosa Murillo | Middle Name | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | - | Check if this is an |
| | | | | | amended filing |
| Official Fo | vrm 107 | | | | |
| | | Affairs for Individ | duals Filing for B | ankruntcy | 4/16 |
| | | ible. If two married people a | | | |
| information. If r | nore space is needed, | , attach a separate sheet to | | | |
| <u> </u> | n). Answer every que | | | | |
| Part 1: Give | Details About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is yoυ | ır current marital statı | us? | | | |
| ☐ Married | d | | | | |
| ■ Not ma | arried | | | | |
| 2. During the | last 3 years, have you | lived anywhere other than | where you live now? | | |
| □ No | | • | • | | |
| | st all of the places you | lived in the last 3 years. Do no | ot include where you live now | | |
| | , , | ŕ | · | | Datas Daktas 0 |
| Deptor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | aress: | Dates Debtor 2 lived there |
| 10005 S F | Ridgeland n, IL 60453 | From-To: Until July 201 | Same as Debtor | | Same as Debtor 1 |
| Oak Lawi | 1, IL 00433 | Onthi daily 201 | • | | From-To: |
| states and territo | | ver live with a spouse or leg alifornia, Idaho, Louisiana, Ne | | | |
| ■ No | aka sura yau fill aut Sa | hadula H. Vaur Cadahtara (O | ficial Form 106H) | | |
| | ake sure you iiii out 30 | hedule H: Your Codebtors (O | iliciai Foitii 100H). | | |
| Part 2 Expla | in the Sources of You | ır Income | | | |
| Fill in the tot | al amount of income yo | mployment or from operating our received from all jobs and a have income that you receive | all businesses, including part- | time activities. | ndar years? |
| □ No | | | | | |
| Yes. Fi | II in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last calenda (January 1 to D | ar year: ecember 31, 2016) | ■ Wages, commissions, bonuses, tips | \$39,815.00 | ☐ Wages, commissions, bonuses, tips | \$2,673.00 |
| | | ☐ Operating a business | | Operating a business | |
| Official Form 107 | | Statement of Financial Aff | airs for Individuals Filing for B | ankruptcy | page 1 |

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| Debtor 2 | Rosa Murillo | ., | | Case | Case number (if known) | | | | |
|--|---|---|---|--|--|---|--|--|--|
| | | | Debtor 1 | | Dobtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| For the calendar year before that: (January 1 to December 31, 2015) | | | ☐ Wages, commissions, bonuses, tips \$31,000.00 | | ☐ Wages, commissions, bonuses, tips | \$19,000.00 | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |
| | alendar year: 1 to December 31 | I, 2014) | ☐ Wages, commissions, bonuses, tips | \$26,806.00 | ☐ Wages, commissions, bonuses, tips | \$0.00 | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |
| □ n | ach source and the No 'es. Fill in the deta | | me from each source separa | tely. Do not include income th | at you listed in line 4. | | | | |
| | cs. I iii iii tiic dete | | | | | | | | |
| | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) | | | |
| | alendar year: 1 to December 31 | I, 2014) | Unemployment | \$1,239.00 | | | | | |
| S. Areei | ither Debtor 1's or No. Neither Debindividual principal | or Debtor 2' stor 1 nor Debtor 2' do days before Go to line 7 List below expaid that control include adjustment Debtor 2 or O days before Go to line 7 List below exinclude pay | personal, family, or househoure you filed for bankruptcy, diseach creditor to whom you paieditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 year both have primarily consumer you filed for bankruptcy, diseach creditor to whom you paiments for domestic support of | r debts? umer debts. Consumer debts Id purpose." id you pay any creditor a total id a total of \$6,425* or more in ints for domestic support obligations bankruptcy case. is after that for cases filed on a umer debts. id you pay any creditor a total id a total of \$600 or more and | one or more payments and thations, such as child support a prafter the date of adjustment. | ne total amount you nd alimony. Also, do | | | |
| | i | include pay | | | | | | | |

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Carlos Murillo, Sr. Debtor 1 Debtor 2 Rosa Murillo Case number (if known) **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe **Pennymac Loan Services** \$3,405.00 \$139,592.00 Mortgage 6101 Condor Dr ☐ Car Moorpark, CA 93021 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Capital One Auto Finan** \$1,410.00 \$19,025.00 ☐ Mortgage 3901 Dallas Pkwy ☐ Car Plano, TX 75093 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other ☐ Mortgage Wfds \$1,047.00 \$15,054.00 Po Box 1697 ■ Car Winterville, NC 28590 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment **Dates of payment Total amount** Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number

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| Deb | tor 2 Rosa Murillo | | Case number | (if known) | |
|------|--|----------|--|--------------------------|---------------------------|
| | Within 1 year before you filed for bank Check all that apply and fill in the details I | | vas any of your property repossessed, foreclose | d, garnished, attached | I, seized, or levied? |
| | No. Go to line 11.Yes. Fill in the information below. | | | | |
| | Creditor Name and Address | De | escribe the Property | Date | Value of the |
| | | E | kplain what happened | | property |
| | Internal Revenue Service | W | /ages | 2016 | \$348.00 |
| | PO Box 7346 Philadelphia, PA 19101-7346 | | Property was repossessed. Property was foreclosed. Property was garnished. | | |
| | | | Property was attached, seized or levied. | | |
| | accounts or refuse to make a payment ■ No □ Yes. Fill in the details. Creditor Name and Address | | e you owed a debt? escribe the action the creditor took | Date action was taken | Amount |
| | Within 1 year before you filed for bank court-appointed receiver, a custodian, | | vas any of your property in the possession of an | assignee for the bene | efit of creditors, a |
| | ■ No | or unou | o. o.i.o. | | |
| | ☐ Yes | | | | |
| Part | 5: List Certain Gifts and Contribution | ns | | | |
| 13. | Within 2 years before you filed for bank No | cruptcy, | did you give any gifts with a total value of more | than \$600 per personí | ? |
| | Yes. Fill in the details for each gift. | | | _ | |
| | Gifts with a total value of more than \$ per person | | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift an Address: | d | | | |
| | Within 2 years before you filed for band No | kruptcy, | did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | Yes. Fill in the details for each gift or | contribu | tion. | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | | Describe what you contributed | Dates you contributed | Value |
| | Church | , | Cash | Monthly \$50 | \$1,200.00 |
| Part | Church | ide) | Cash | Monthly \$50 | \$1,20 |
| 15. | Within 1 year before you filed for bank or gambling? | uptcy o | r since you filed for bankruptcy, did you lose any | thing because of thef | t, fire, other disasto |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Describe the property you lost and how the loss occurred | Includ | ribe any insurance coverage for the loss le the amount that insurance has paid. List pending | Date of your loss | Value of property lost |
| | | insura | nce claims on line 33 of Schedule A/B: Property. | | |

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Debtor 1 Carlos Murillo, Sr.

| Deb | otor 2 | Rosa Murillo | C | ase number (i | f known) | | | | | |
|-----|---|---|--|-----------------|---|------------------------|--|--|--|--|
| | | | | | | | | | | |
| Par | t 7: | List Certain Payments or Transfers | | | | | | | | |
| | consu | n 1 year before you filed for bankruptcy, ulted about seeking bankruptcy or prepa le any attorneys, bankruptcy petition prepare | ring a bankruptcy petition? | | | ty to anyone you | | | | |
| | | No | | | | | | | | |
| | _ ` | ∕es. Fill in the details. | | | | | | | | |
| | Addr Emai | on Who Was Paid ress il or website address on Who Made the Payment, if Not You | Description and value of any prope transferred | erty | Date payment or transfer was made | Amount of payment | | | | |
| | Glea 77 W Chic | nson & Gleason LLC V. Washington, Ste 1218 cago, IL 60602 ://chilawyers.com | \$90.00 attorney fees plus \$335. filing fee. | 00 court | 2016 | \$425.00 | | | | |
| | 4800 Tucs | nmit Financial Education Inc DE Flower St son, AZ 85712 ://summitfe.org | Credit Counseling | | 2016 | \$9.95 | | | | |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I No Yes. Fill in the details. | | or to make payments to your creditors | | r transfer any proper | ty to anyone who | | | | |
| | Perso Addr | on Who Was Paid ress | Description and value of any prope transferred | erty | Date payment or transfer was made | Amount of payment | | | | |
| | Includinclud | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | | | |
| | Perso Addr | on Who Received Transfer ress | Description and value of property transferred | | ny property or received or debts | Date transfer was made | | | | |
| | Pers | on's relationship to you | | paid III 6A0 | | | | | | |
| 19. | benef | n 10 years before you filed for bankruptc iciary? (These are often called asset-prote No Yes. Fill in the details. | | elf-settled tru | st or similar device o | of which you are a | | | | |
| | Name | e of trust | Description and value of the prope | rty transferre | ed | Date Transfer was made | | | | |
| | | | | | | | | | | |

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Debtor 1 Carlos Murillo, Sr. Debtor 2 Rosa Murillo

Case number (if known)

| Pa | rt 8: | List of Certain Financial Accounts, In | strur | ments, Safe Depos | it Boxes, and St | orage Unit | ts | | |
|---|--------|--|---------|--|----------------------------|-------------------------|--|------|---|
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit u houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | , | | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of Financial Institution and dress (Number, Street, City, State and ZIP | | st 4 digits of count number | Type of account instrument | ınt or | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | | you now have, or did you have within 1 n, or other valuables? | year | before you filed fo | or bankruptcy, ar | ny safe de _l | posit box or other depos | itor | ry for securities, |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| 22. | Hav | e you stored property in a storage unit | or pl | ace other than you | r home within 1 | year befor | re you filed for bankrupto | су? | |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | | Who else has or to it? Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| Pai | rt 9: | Identify Property You Hold or Contro | l for s | ĺ | | | | | |
| 23. | • | | | | lude any propert | ty you bor | rowed from, are storing f | ior, | or hold in trust |
| | | No | | | | | | | |
| | | Yes. Fill in the details. | | | | | | | |
| | _ | ner's Name dress (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value |
| Pai | rt 10: | Give Details About Environmental Inf | forma | ation | | | | | |
| For | the p | ourpose of Part 10, the following definit | ions | apply: | | | | | |
| | toxi | ironmental law means any federal, state c substances, wastes, or material into tale alations controlling the cleanup of thes | the ai | ir, land, soil, surfac | e water, ground | | | | |
| | | means any location, facility, or propert wn, operate, or utilize it, including disp | - | - | environmental l | aw, wheth | er you now own, operate | ∍, o | r utilize it or used |
| | | ardous material means anything an envardous material, pollutant, contaminant | | | as a hazardous | waste, ha | zardous substance, toxid | c sı | ubstance, |
| Rep | ort a | II notices, releases, and proceedings th | nat yo | ou know about, reg | ardless of when | they occu | ırred. | | |
| 24. | Has | any governmental unit notified you that | at you | ı may be liable or p | ootentially liable | under or i | n violation of an environ | me | ntal law? |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental un Address (Number, ZIP Code) | | _ | onmental law, if you it | | Date of notice |
| | | | | 0000) | | | | | |

Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Page 50 of 68 Document Carlos Murillo, Sr. Debtor 1 Debtor 2 Rosa Murillo Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 7IP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carlos Murillo, Sr. /s/ Rosa Murillo Carlos Murillo, Sr. Rosa Murillo Signature of Debtor 1 Signature of Debtor 2 Date March 28, 2017 Date March 28, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Yes. Name of Person

Official Form 107

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Debtor 1 Carlos Murillo, Sr.

Debtor 2 Rosa Murillo Case number (if known)

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| Fill in this infor | mation to identify your case: | | |
|--|---|--|--|
| Debtor 1 | Carlos Murillo, Sr. First Name Middle Nar | ne Last Name | |
| Debtor 2 | Rosa Murillo | ne Last Name | |
| (Spouse if, filing) | First Name Middle Nam | ne Last Name | |
| United States Ba | ankruptcy Court for the: NORTHERN | DISTRICT OF ILLINOIS | |
| Case number _ | | | ☐ Check if this is an amended filing |
| | | | |
| Official Fo | orm 108 | | |
| Statemer | nt of Intention for Inc | dividuals Filing Under Chap | oter 7 12/15 |
| ■ creditors hav you have lease You must file thi whiche on the If two married pe sign ar Be as complete write y Part 1: List You 1. For any credit information be | ever is earlier, unless the court extend form eople are filing together in a joint case and date the form. and accurate as possible. If more spa our name and case number (if known | as not expired. after you file your bankruptcy petition or by the dat s the time for cause. You must also send copies to e, both are equally responsible for supplying corre ce is needed, attach a separate sheet to this form.). ms ule D: Creditors Who Have Claims Secured by Prop | o the creditors and lessors you list ct information. Both debtors must On the top of any additional pages, errty (Official Form 106D), fill in the |
| name: | Ally Financial | ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a | ■ No |
| property securing debt: | 2013 Chevrolet Equinox 35000 miles Son Drives and Pays | Reaffirmation Agreement. Retain the property and [explain]: Son Drives and Pays | |
| Creditor's C | Capital One Auto Finan | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: | Motor Vehicle: | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes |
| Creditor's P | Pennymac Loan Services | ☐ Surrender the property. | □ No |

Official Form 108

property

Description of

name:

Statement of Intention for Individuals Filing Under Chapter 7

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

12208 S Lawndale Alsip, IL

60803 Cook County

Yes

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| Debtor 1 Carlos Murillo, Sr. Debtor 2 Rosa Murillo | Case number (if | known) |
|---|--|---|
| securing debt: | | |
| Creditor's Wfds name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of Cruz 2014 Chevy property | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ Yes |
| securing debt: | | |
| in the information below. Do not list real estate lea | Leases ou listed in Schedule G: Executory Contracts and Une ases. Unexpired leases are leases that are still in effe lease if the trustee does not assume it. 11 U.S.C. § 36 | ct; the lease period has not yet ended. |
| Describe your unexpired personal property lease | s | Will the lease be assumed? |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |

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| Debtor 1 Debtor 2 | Carlos Murillo, Sr. Rosa Murillo | Case number (if known) |
|----------------------|--|--|
| | | |
| | | |
| | | |
| Part 3: | Sign Below | |
| | nalty of perjury, I declare that I have indica that is subject to an unexpired lease. | ated my intention about any property of my estate that secures a debt and any personal |
| X /s/ | Carlos Murillo, Sr. | χ /s/ Rosa Murillo |
| Cai | rlos Murillo, Sr. | Rosa Murillo |
| Sigr | nature of Debtor 1 | Signature of Debtor 2 |
| Date | e March 28, 2017 | Date March 28, 2017 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Document Page 59 of 68

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In 1 | Carlos Murillo, Sr. re Rosa Murillo | Case No. | | |
|------|--|--|-----------------------------|-----------|
| | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENSATION OF AT | TORNEY FOR D | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in banks be rendered on behalf of the debtor(s) in contemplation of or in connection with the second of the debtor of the deb | ruptcy, or agreed to be paid | I to me, for services rende | red or to |
| | For legal services, I have agreed to accept | \$ | 940.00 | |
| | Prior to the filing of this statement I have received | | 90.00 | |
| | Balance Due | \$ | 850.00 | |
| 2. | \$335.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with any other p | person unless they are men | nbers and associates of my | law firm |
| | ☐ I have agreed to share the above-disclosed compensation with a person or percopy of the agreement, together with a list of the names of the people sharing | | • | firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all | aspects of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor b. Preparation and filing of any petition, schedules, statement of affairs and plan c. Representation of the debtor at the meeting of creditors and confirmation head d. [Other provisions as needed] a. Analysis of the debtor's financial situation, and rendering a petition in bankruptcy; | which may be required; ring, and any adjourned he | arings thereof; | |
| | b. Preparation and filing of any petition, schedules, statemen | nts of affairs and plan v | vhich may be required | l; |
| | Representation of the debtor at the meeting of creditors ar thereof; | nd confirmation hearin | g, and any adjourned | hearings |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the fol a. Representation of the debtors in any dischargeability action proceeding. | | ances, or any other ac | lversary |
| | b. Debtor is responsible for the 2 mandatory credit counseling | ng classes. | | |
| | c. This fee agreement does not include representation in mo | tions to redeem. | | |

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| In re | Carlos Murillo, Sr. Rosa Murillo | Case No. |
|-------|-------------------------------------|----------|
| | Debtor(s) | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| | CERTIFICATION |
|--|--|
| I certify that the foregoing is a complete s this bankruptcy proceeding. | tatement of any agreement or arrangement for payment to me for representation of the debtor(s) |
| March 28, 2017 | /s/ Julie Gleason |
| Date | Julie Gleason 6273536 |
| | Signature of Attorney |
| | Gleason & Gleason |
| | 77 W Washington, Ste 1218 |
| | Chicago, IL 60602 |
| | (312) 578-9530 Fax: (312) 578-9524 |
| | troy@chicagobk.com |
| | Name of law firm |



Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 = (\$1275 total costs

Payment Plan: 3 payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests.

FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case.

Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filing and my first 341 meeting of creditors. I understand that if my case closes without discharge and my certificate is dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it.

Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, repossessions, personal loans, payda,

Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student joans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, taxes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the last 70 days may not be discharged.

Secured Loans Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HOA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union loans.

Secured Loans Keeping: Initial here:

I understand I must continue to make regular payments on all secured loans I am keeping. Thay have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. I understand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and nome equity lines of credit.

Payday Loans | Autodebits | Post dated checks: You must stop them with your bank. It may require closing the bank account.
Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service.

.Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing tills.

Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debtor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time. For the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 arrifour for attorney time.

| Client | & James | Attorney | 1 | |
|--------------|------------|----------|-----|--|
| | (| | | |
| Joint Client | - - | | \ / | |





\$9.95 (pick the cheapest option)

- When it asks you to upgrade click "no thanks"
- When you create an account enter "Gleason" for lawyers name
- AFTER YOU PAY FOR THE CLASS YOU MUST COMPLETE THE CHAT PORTION OF THE CLASS FOR A CERTIFICATE TO BE ISSUED. THE CLASS IS NOT OVER UNTIL YOU SEE YOUR CERTIFICATE.
- They will automatically send us a copy of the certificate.



- Take after getting a case number and before your bankruptcy
 - \$9.95 (Pick cheapest option)

hearing,

- Summit will automatically file the certificate with the court when you complete it and they will send us a copy
- If you do not complete the class your case will close at the end, without discharge, and the court charges \$260 to reopen it, file the certificate and receive a discharge.



Chapter 7 Bankruptcy Retainer Agreement

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER 7 BANKRUPTCY PETITION

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.

| THE EARNED FEE FOR THE PREPETITION SERVICE IS \$ |
|--|
| FILING FEE OF \$ 335.00 |
| TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$ |
| RETAINED WITH (CASH CHECK DEBIT MONEY ORDER) \$ |
| BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$ |
| AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$FOR POST FILING LEGAL SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT. |
| CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON. |
| I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL EXPENSES OF GLEASON AND GLEASON. |
| LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL |
| FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHERE (1) THE DEBTOR'S ATTORNEY HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT MAY ALLOW THE ATTORNEY TO WITHDRAW FROM REPRESENTATION OF THE DEBTOR ON MOTION OF THE ATTORNEY. |
| DATE CLIENT ATTORNEY |
| JOINT CLIENT |

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Cap1/1&t Po Box 30253 Salt Lake City, UT 84130

Capital One Auto Finan 3901 Dallas Pkwy Plano, TX 75093

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Chase Card Po Box 15298 Wilmington, DE 19850

Check into Cash 1637 S Cicero Cicero, IL 60804

Comenity Bank/avenue Po Box 182789 Columbus, OH 43218

Comenity Bank/express Po Box 182789 Columbus, OH 43218

Comenity Bank/Inbryant 4590 E Broad St Columbus, OH 43213

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218 Comenitycapital/mprcc Po Box 182120 Columbus, OH 43218

Comenitycapital/ulta Po Box 182120 Columbus, OH 43218

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Dsnb Macys 9111 Duke Blvd Mason, OH 45040

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Famsa 2727 Lbj Fwy Ste 500 Dallas, TX 75234

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Irf/pioneer
6520 Indian River Rd
Virginia Beach, VA 23464

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051 Nordstrom/td 13531 E Caley Ave Englewood, CO 80111

Pennymac Loan Services 6101 Condor Dr Moorpark, CA 93021

Syncb/care Credit C/o Po Box 965036 Orlando, FL 32896

Syncb/gap Po Box 965005 Orlando, FL 32896

Syncb/jcp Po Box 965007 Orlando, FL 32896

Syncb/lenscrafters C/o Po Box 965036 Orlando, FL 32896

Syncb/lowes Po Box 956005 Orlando, FL 32896

Syncb/old Navy Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

Thd/cbna Po Box 6497 Sioux Falls, SD 57117

Turner Acceptance Crp 5900 W Howard St Skokie, IL 60077

Vw Credit Inc 1401 Franklin Blvd Libertyville, IL 60048

Wfds Po Box 1697 Winterville, NC 28590

Wffnb Retail Po Box 94498 Las Vegas, NV 89193

Zale Delaware Inc/sj 375 Ghent Rd Fairlawn, OH 44333 Case 17-09932 Doc 1 Filed 03/29/17 Entered 03/29/17 16:04:23 Desc Main Document Page 68 of 68

United States Bankruptcy Court Northern District of Illinois

| In re | Carlos Murillo, Sr. Rosa Murillo | | Case No. | | |
|-------|-------------------------------------|---|-------------------------------|---------------|--|
| | - COOK INCLUDE | Debtor(s) | Chapter 7 | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| | | Number o | f Creditors: | 37 | |
| | (our) knowledge. | s) hereby verifies that the list of cred | nois is true and correct to t | ne oest of my | |
| Date: | March 28, 2017 | /s/ Carlos Murillo, Sr. Carlos Murillo, Sr. | | | |
| | | Signature of Debtor | | | |
| Date: | March 28, 2017 | /s/ Rosa Murillo | | | |
| | | Rosa Murillo | | | |
| | | Signature of Debtor | Signature of Debtor | | |